

LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

343

Lobbyist's Registration Number

Instructions

- Print in ink or type.
- Complete form and return with \$110 registration fee to the Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge, LA 70808, (225) 763-8777 or (800) 842-6630.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

1. NAME Adcock, Sr. Herschel C.
Last First MI

2. BUSINESS PHONE 225-761-9191
Area Code and Phone Number

3. BUSINESS ADDRESS 10915 Perkins Road, Suite C, Baton Rouge, LA 70810
Street and No. City State Zip

MAILING ADDRESS Same as above.
Street and No. City State Zip

4. EMPLOYER Self.

5. EMPLOYER'S ADDRESS Same as above.
Street and No. City State Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name Louisiana Consumer Finance Association

Address 10915 Perkins Road, Suite C, Baton Rouge, LA 70810

Business or purpose Trade association.

Does this person pay you? Yes.

If No, who pays you? _____

FOR OFFICE USE ONLYPostmark Date: 1/31/08

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ckt 6163

\$110.00

ACK✓

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NOT DOCUMENTED

LOBBYING REGISTRATION FORM

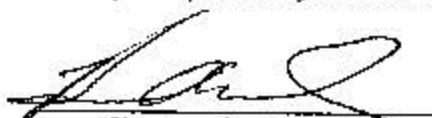
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2. Name Louisiana Dealer Services Insurance
Address P.O. Box 83480, Baton Rouge, LA 70884
Business or purpose Insurance services.
Does this person pay you? Yes.
If No, who pays you? _____
3. Name The Cowart Group, Inc.
Address 10935 Perkins Road, Suite A, Baton Rouge, LA 70810
Business or purpose Governmental relations.
Does this person pay you? Yes.
If No, who pays you? _____
4. Name _____
Address _____
Business or purpose _____
Does this person pay you? _____
If No, who pays you? _____

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.


Signature of Lobbyist